Reviewer: Julie Hastings Honolulu 96817 Begin Date: 7/15/2020 Foster Family Home Required Certificate [11-800-6] 6.(d)(1) Comply with all applicable requirements in this chapter; and Comment: 6.(d)(1)-Annual inspection conducted for this 3 bed home. A corrective action report (CAR)was issued during the visit and a corrective action plan (CAP) is due back to CTA by 7/28. Foster Family Home **Background Checks** [11-800-8] Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and 8.(a)(2) Comment: 8.(a)(2) CG#1 APS/CAN lapsed. CG#1 was due on or before 9/12/19. No current APS/CAN in binder. Foster Family Home Client Care and Services [11-800-43] 43.(c)(5)(A) Appropriate, safe techniques, and infection control procedures; and Comment: 43.(c)(5)(A) Client #3 was behind a locked door without the ability to unlock in case of emergency. This RN witnessed CG#1 unlocking room from the hallway as I approached client door. 3 Person Fire Safety, 3 Person Fire Safety (3P) Fire **Natural Disaster** Emergency escape and rescue routes shall be provided in the sleeping rooms of the clients. The routes shall be in (3P)(e)(2) Fire accordance with applicable county one and two family building code requirements; Comment: (3P)(e)(2) Fire Client #3 door locked from hallway prohibiting client from escape route in case of emergency. Foster Family Home Medication and Nutrition [11-800-47]

47.(d)(1) By order of a physician; Comment:

47.(d)(1)

Client #1 and Client #3 do not have MD order in chart for

Foster Family Home - Corrective Action Report

Foster Family I	Home	Client Rights	[11-800-53]
53.(b)(7)	Not be I	umiliated, harassed, or threatened, I restraints may be used as specified	and be free from physical and chemical restraints. Physical and d in section 11-800-47(d);
53.(b)(9)	Be treat privacy	ed with understanding, respect, and n treatment and in care of the client'	full consideration of the client's dignity and individuality, including s personal needs;
Comment:	*****		
53.(b)(7)			

Client #3 rights were violated by keeping client locked behind door without the ability to exit at will.

53.(b)(9) Client #3 was not treated with dignity or in consideration of client rights when kept behind locked door.

Julie Icothise PN BSU

Compliance Manager L. Dinne

Date 7/15-/20

Date

Community Care Foster Family Home (CCFFH) Written Corrective Action Plan (CAP) Chapter 11-800

PCG's Name on CCFFH Certificate: ROSARIO C NIVERA CCFFH

(PLEA'SE PRINT)

CCFFH Address:

920 LAKI ROAD HONOLULU HAWAII 96817

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8A2	Current APS/CAN was placed in the binder *	07/15/20	I'll put a calendar reminder 7 days prior to the due date of the APS/CAN.
			I'll make sure to place it right away in the binder so everything is updated.
43C5A, 3PE2, 47D1	Patient's door knob was fixed right away, patient has an access to the lock.	07/15/20	I'll make sure the patient can easily open the door in case of emergency.
47D1, 53B7, 53B9	Patient's MD order for was placed in the binder	07/15/20	I'll make sure there is updated MD order for in the patient's record.
			I'll make sure to place it in front of the binder where it can be easily seen.

1	All items	that w	ere	fixed	are a	attached	to this	CAP
PCG	's Signatur	e: /	n	i	0	$\sim N$	iner	_

Date: 07/20/20

CTA has reviewed all corrected items